



Matt Harpring's Holiday Camp

SKILLS & DRILLS

Dates:

Day 1 - Dec. 30 (1pm-4pm)

Day 2 - Dec. 31 (9am-12pm)

Cost: \$45 per day

Ages: 7-14 years (Boys & Girls)

Location:

The Park Center
202 E. Murray Park Ave.

Register Online :

www.mcreg.com

or

At The Park Center

Day 1

- Heavy concentration of Shooting form & Technique
- Proper footwork off the pass and dribble
- Fixing common shooting problems
- Individual 1 on 1 situational breakdowns
- Proper Defensive Stance and techniques
- Individual Competitive Games
- “Team” Competitive Games

Day 2

- Shooting review and drills
- Stationary Dribbling
- Walking / Running Ball handling Drills
- Fast Break dribble moves
- 2 on 1 Situations
- Individual Competitive Games
- “Team” Competitive Games

For more information

801.264.2614

www.murray.utah.gov

www.mattharpring.com



MATT HARPRING'S Holiday Camp
Skills & Drills Application and Medical Release Form
(one form per child)

NAME: _____ GENDER: _____ BIRTHDATE: _____ AGE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PARENT'S NAME: _____ DAYTIME PHONE #: _____

E-MAIL ADDRESS: _____

EMERGENCY CONTACT NAME: _____ PHONE #: _____

CAMP INFORMATION

CHECK DAY Day 1 - December 30 (1pm-4pm)
 Day 2 - December 31 (9am-12pm)

COSTS: \$45 per participant / per day

PAYMENT: Make all checks payable to Murray City and mail with application to:
 Murray Parks & Recreation
 Matt Harpring Skills & Drills Basketball Camp
 296 E. Murray Park Avenue
 Murray, UT 84107

Credit cards accepted: Discover, Visa, Master Card & AMEX

Refund Policy: No refund one (1) week prior to camp beginning.

RELEASE FOR MEDICAL TREATMENT

Is tetanus shot current?: _____ Date if known: _____ Allergies: _____

Physical concerns staff should be aware of: _____

I hereby authorize medical treatment for: _____

Signature of Parent/Guardian: _____ Date: _____

PLEASE READ AND SIGN THE FOLLOWING STATEMENT

I recognize there are inherent risks involved in this sport activity. In consideration of the services provided, I hereby release and hold harmless, the City of Murray and Matt Harpring Enterprises LLC, doing business as Matt Harpring's skills & drills-Basketball Camp, and its director, employees and agents from any and all liability for injuries, including those resulting in death, and illnesses incurred while attending camp or occurring as a result of having attended camp. I certify that my child is in good health and is able to participate in all program activities. Furthermore, in an event of an emergency requiring medical attention, I shall pay for the services rendered.

☐ I have hereby read and signed the Concussion/Head Injury Policy required by Murray City and have included it with my registration.

Signature of Parent/Guardian: _____ Date: _____

801-264-2614
WWW.MATT HARPRING.COM
Email: kewelton@gmail.com

OFFICE USE ONLY

Paid \$ _____
CSH CHK VSA
MC AMEX DIS C
Date _____
Staff _____